PART B - FEE(S) TRANSMITTAL

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or <u>Fax</u> (571) 273-2885						, <u> </u>		
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.							5 should be completed where ent correspondence address as separate "FEE ADDRESS" for	
	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 5642 7590 09/27/2005 SCIENTIFIC-ATLANTA, INC. INTELLECTUAL PROPERTY DEPARTMENT 5030 SUGARLOAF PARKWAY LAWRENCEVILLE, GA 30044 DEC 27 2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission			
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19/90	\2				Fave	Ropski	(Depositor's name)	
	12/28/2005 MGEBREM2 00000043 190761 09590520						(Signature)	
01 FC	:1501 1400.00	DA	TEAT		Decen	ber 21, 2005	(Date)	
1	APPLICATION NO. FILING DATE		FIRST NAMED		D INVENTOR	ATTORNEY DOCKET NO	O. CONFIRMATION NO.	
	09/590,520	09/590,520 06/09/2000		Dean F. Jerding		A-6287	1993	
TITLE OF INVENTION: VIDEO ON DEMAND SYSTEM WITH PARAMETER-CONTROLLED BANDWIDTH DEALLOCATION								
	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FE	E TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	NO \$1400		\$0	\$1400	12/27/2005	
	EXAMINER		ART UNIT		CLASS-SUBCLAS	S		
	SRIVASTAVA, VIVEK		2617		725-095000			
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,								
				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
·	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	Scientific-Atlanta, Inc. Lawrenceville, Georgia							
Please check the appropriate assignee category or categories (will not be printed on the patent):							group entity Government	
					Payment of Fee(s):			
	X Issue Fee			A check in the amount of the fee(s) is enclosed.				
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					□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
]	The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application ident NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assigne interest as shown by the records of the United States Patent and Trademark Office.						lication identified above. or the assignee or other party in	
•	Authorized Signature	hella?	1111	Date 12/21/2005				
_	Typed or printed name Wm. Brook Lafferty				Registration No. 39, 259			

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